Outcome Assessment Information Set (OASIS) Update (Memo #10)

Date: October 26, 1999 **To:** Home Health Agencies **DSL-BQA-99-067 HHA 33**

From: Sue Schroeder, Director, Bureau of Quality Assurance

The purpose of this memorandum is to provide information related to the federal \underline{O} utcome \underline{AS} sessment \underline{I} nformation Set (OASIS).

OASIS Errors

The accuracy of OASIS data is critical. Home health agency staff need to assure that OASIS is accurate when the information is transmitted to the state.

There are three types of errors that agencies may encounter when submitting OASIS data to the state system: (1) **fatal** *file* **errors**, (2) **fatal** *record* **errors** and (3) **non-fatal errors**.

Fatal file errors result in rejection of the *entire file* (batch status "REJECTED" on the Initial Feedback Report). Fatal file errors include missing, mismatched, or invalid HHA Agency ID numbers in the header record or individual patient records, missing header or trailer records, and a space or null value in the RFA (Reason for Assessment) field.

Fatal record errors (number of records rejected greater than 0 on the Initial Feedback and Final Validation reports). Fatal record errors result in rejection of one or more *individual patient records*. Fatal record errors include insufficient information to identify the patient, invalid or missing patient birthdate, invalid or missing start of care or resumption of care dates, and duplicate records (attempting to resend an assessment that has already been submitted to and accepted by the state system).

Non-fatal errors do not result in rejection of a record. Non fatal errors include missing or questionable data of a non-critical nature, record sequencing and timing errors, and field consistency errors. Non-fatal (warning) errors are reported to the home health agency in the "Final Validation Report."

Fatal file errors and **fatal record errors** require that the agency correct the error(s) and resubmit the records as appropriate by the required date (i.e., by the last day of the month following the LOCK_DATE). If a submission contained a fatal error(s) in some records and the remaining records were accepted, you cannot resend the same file because the accepted records have already been loaded into the state database and resubmitted records will be rejected as duplicates. Only the records that were rejected due to fatal record errors should be resubmitted (after the corrections are made).

Non-fatal errors in locked records can be classified as either **KEY field errors** or **non-KEY field errors**. The correction procedures agencies should follow are described below.

Correction Policy

When home health agency staff detect an error in a locked OASIS record, they must first determine whether the error is in a *KEY fields* include important resident and agency identifiers, dates, and disposition information. Refer to the attached "Clarification to Version 1.03 of the OASIS-B1 Data Specifications" to obtain a list of key fields and additional information on the OASIS correction policy. This information may also be obtained in the Bulletin section of the OASIS system and from the HCFA OASIS website:

http://www.hcfa.gov/medicare/hsqb/oasis/oasishmp.htm

Key Field Change to an Accepted Record

To correct an error in a *KEY field* in an OASIS record that was previously submitted and accepted in the State database, the agency must send an OASIS Key Field Correction Form (attachment) to the State, indicating both the "submitted-incorrect" and the "corrected" values(s). State staff will review the request and correct the record in the State database. The home health agency must have a method to assure that subsequent assessments include the

corrected data value. *KEY field* changes may be requested by the agency at any time, but should be submitted as soon as possible after the error is detected. Changes can not be made by the State for errors in the Reason for Assessment (M0100). The agency must submit another record with the correct assessment code.

Key Field Change to a Rejected Record

When an OASIS record is rejected by the Standard OASIS system at the State level due to an error in *a KEY field*, the home health agency may unlock the record, correct only the *KEY field* error(s), and relock the record, using a new lock date, and retransmit the record to the State.

Non-Key Field Change to an Accepted Record

If a HHA determines that a change must be made to a *Non-Key* field for a record that has been accepted by the State, the agency must submit a corrected record by doing the following:

- 1. Make a copy of the incorrect record.
- 2. Change any non-key fields in the new assessment record.
- 3. Increment the CORRECTION_NUM by one digit in the new record.
- 4. Lock the new record with a new lock date.
- 5. Submit the corrected record to the State.

The CORRECTION_NUM is a counter field used to track corrections made to an assessment. The CORRECTION_NUM must be 00 when the record is initially locked and submitted. If the record was accepted (not a fatal file error or fatal record error) but needs to be submitted again because of a correction to a non-key field, the CORRECTION_NUM must be incremented by one digit each time it is resubmitted.

Transmission Problems

At times you may encounter problems when attempting to submit your OASIS assessments. If you receive messages such as "There was no response. The server could be down or is not responding," please do not call the State. Continue trying to submit your assessments for at least 24 hours. If after 24 hours you are having the same problem, then contact Cindy Symons at 608-266-9675 or Chris Benesh at 608-266-1718. This will spare state staff from having to return dozens or hundreds of phone calls unnecessarily while ensuring that we become aware of problems with the state system in a timely manner. Your cooperation will be appreciated.

Data Security

Security of resident specific information is of primary importance. Both federal and state regulations require the agency to safeguard clinical record information against loss, destruction, or unauthorized use.

Home health agencies need to ensure that all necessary measures are taken to secure patient specific assessment information. Password protection is an important part of protecting the security of electronic information. It is important for the home health agency to change their internal system passwords when staff who have access to the OASIS system end their employment at the agency. If an ownership change or other development results in a change in the administration or the replacement of key personnel such as medical records staff, the state should be contacted so a new OASIS system password can be assigned. This will prevent access to your agency's data submissions, or feedback reports by individuals who are no longer employed at your agency but who may have knowledge of your current user ID and password.

Keep Current on OASIS Information

Current information about OASIS data collection and transmissions can be obtained electronically from the INTERNET. In addition, information will also be posted at the Bulletin section on the OASIS system. Important INTERNET addresses include:

Wisconsin - State information related to HHA and OASIS:

http://www.dhfs.state.wi.us/rl dsl/hhas/hhawhats.htm

HCFA OASIS website:

http://www.hcfa.gov/medicare/hsqb/oasis/oasishmp.htm

As of August 13, 1999, you can view Individual Patient Privacy Notices in Spanish on the HCFA website:

A link to all available OASIS regulations to date:

http://www.hcfa.gov.medicare/hsqb/oasis/hhregs.htm

The National Technical Information Service (NTIS) has changed their telephone number to 1-800-553-6847. NTIS provides the public with copies of Federal publications including regulations for a fee.

OASIS Implementation Manual 1999

HCFA has revised the OASIS Implementation Manual. There are eight areas of the manual that have significant changes, which justifies why agencies must obtain the new version of the manual and replace the 10/98 version. You may download a copy from the HCFA website listed below (note that this manual is over 450 pages):

http://www.hcfa.gov/medicare/hsqb/oasis/usermanu.htm [no longer operable, see

http://cms.hhs.gov/oasis/usermanu.asp instead]

You may also obtain copies from the Bureau of Quality Assurance. If you intend to pick up this publication in person, please call one day in advance to assure that a supply is available when you arrive. Please bring a check or exact change. If your agency is *TAX EXEMPT*, the tax exempt number must be provided or the cost, including tax, will be charged. The cost of this manual is listed in the following table:

| OASIS IMPLEMENTATION MANUAL 1999 PSL-3140 (Revision effective 6-99) | | | |
|--|----------|------------|----------|
| Walk in | | Shipped | |
| Tax Exempt | WITH TAX | Tax Exempt | WITH TAX |
| \$13.61 | \$14.36 | \$16.83 | \$17.76 |
| If you want more than one copy of this manual, please call 608-267-1446 to obtain the cost of multiple copies. | | | |

Make the check payable to DIVISION OF SUPPORTIVE. Include the following information with your written request and check:

- the name of the publication
- the quantity of publications requested
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- both the street and mailing address, if the mailing address is a PO Box
- the phone number of the requestor to contact if there are questions

MAIL YOUR REQUEST TO THE FOLLOWING ADDRESS:

Bureau of Quality Assurance Attention: Barb Carey PO Box 2969 Madison WI 53701-2969

Contact Barb Carey at 608-267-1446 if you have questions.

FAQs

Q. Does a resumption of care need to be completed on someone returning from the hospital if the recertification is also due within the same period of time?

A. The resumption of care comprehensive assessment must be completed within 48 hours of the patient's return from the hospital. If the follow-up falls within the same time frame, only a resumption of care is necessary. This will also satisfy the requirement for the recertification assessment.

Q. If the SOC date falls at the end of the month such as 12/31/98, what is the due date of the next recertification?

A. The first follow-up must be completed on or after 2/23/99 (5 days before 2/28/99) and on or before 2/27/99 (one day before 2/28/99). If the calendar day of the start of care exceeds the last day of a month in which a follow-up assessment is due, the completion dates are computed relative to the last day of the target month.

Q. With the new Federal Register notice of June 18, 1999, we assume that a patient who is no longer receiving skilled care but continuing to receive personal care only will somehow cease OASIS data collection at the end of skilled care. Is this correct? If it is, how should OASIS items M0100, M0870, and M0880 be answered?

A. You are correct in stating that the end of the skilled care "episode" will require a comprehensive assessment with OASIS data collection even when the patient is continuing to receive personal care services from the agency. In this case, OASIS item M0100 (Reason for Assessment) should be marked with Response 9 (Discharge from agency). OASIS item M0870 (Discharge Disposition) should be marked with Response 1 (Patient remained in the community), and item M0880 should be marked with Response 3 (yes, assistance or services provided by other community resources). (If Response 2 also applies to M0880, that too should be marked.) We realize the wording for M0100 and M0880 is somewhat awkward in this situation; clinicians should note in their documentation that the agency will be continuing to provide personal care only services.

Q. Should a Home Health Agency be expected to submit a discharge assessment on their patients if the Agency shuts its doors?

A. Any Home Health Agency who closes its doors is expected to submit discharge assessments on their patients.

OASIS ETN

The Bureau of Quality Assurance is in the process of planning OASIS Educational Teleconference Network (ETN) programs. Please email topics that you would like discussed and/or questions that you have to Barbara Woodford at woodfba@dhfs.state.wi.us [replaced by Marianne Missfeldt, (715) 836-4036, 10/03].

Common Errors

The error that is occurring most frequently is Error Number 102, "This date minus M0090_INFO_CPLT_DT must be >=0 and <=7 days." To avoid this error and meet the record lock requirement insure that all assessment records are locked (LOCK_DATE) within 7 days following the assessment completion date (M0090_INFO_completed_DT).

State Help

Questions related to OASIS data collection should be directed to: Barbara Woodford, OASIS Educational Coordinator (715) 855-7310 or woodfba@dhfs.state.wi.us

Questions related to software and OASIS data transmission should be direct to either: Cindy Symons, OASIS Technical Analyst (608) 266-9675 or symoncg@dhfs.state.wi.us or Chris Benesh, OASIS Automation Coordinator (608) 266-1718 or benesce@dhfs.state.wi.us